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District Court Clerk
County Name County Courthouse
County Mailing Address
City, MT Zip

Re: Cause No. Cause #
MT Dept. of Corrections and Respondent Name

Dear Clerk:

Enclosed please find an original and two copies each of a Request for Default and an Entry of Default. Please file the Request and enter the respondents' default at your earliest convenience. Postage-paid envelopes are provided for you to return copies of the documents to me and to mail copies to the respondents. Also enclosed is our proposed Order for Cost-of-Care Contribution. Once the default has been entered, please ask the judge to sign the order. A second set of postage-paid envelopes is enclosed so that you can forward copies of the signed order to the parties.

Should you have questions or concerns, please let me know.

Thank you for your assistance.

Sincerely,

RPA's Name
Regional Program Administrator

Enclosures